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CONFIRMATION NO. 2850

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|--|---|---------------------------|---|--|----------------------------|
| SERIAL NUMBER 10/658,823 | FILING DATE 09/08/2003 RULE | CLASS 435 | GROUP ART UNIT 1651 | ATTORNEY DOCKET NO. 020014-013911US | |
| APPLICANTS Shawn DeFrees, North Wales, PA; ** CONTINUING DATA ***** This application is a DIV of 09/577,120 05/23/2000 ABN which claims benefit of 60/136,150 05/24/1999 ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/28/2003 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> | | STATE OR COUNTRY PA | SHEETS DRAWING 18 | TOTAL CLAIMS 15 | INDEPENDENT CLAIMS 1 |
| ADDRESS 20350 TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR SAN FRANCISCO , CA 94111-3834 | | | | | |
| TITLE Glycosyltransferase inhibitors | | | | | |
| FILING FEE RECEIVED 750 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |